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OCT 18 2004

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October 18, 2004

TELECOPIER TRANSMITTAL SHEET

TELECOPY TO: COMMISSIONER FOR PATENTS

FAX NUMBER: (703) 872-9306

FROM: STEVEN L. SMITH

RE: 09/963,360  
WAR1394.07A

## CERTIFICATE OF FACSIMILE TRANSMISSION (37 CFR 1.8)

I hereby certify that the enclosed:

1. TRANSMITTAL LETTER (1 PAGE)
2. AMENDMENT (19 PAGES)

are being facsimile transmitted to the United States Patent and Trademark Office (Fax No. 703-872-9306) on 18 October 2004.

STEVEN L. SMITH

(Type or print name of person signing certificate)



(Signature)

☒ Original will not follow

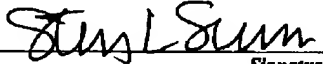
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NUMBER OF PAGES SENT (INCLUDING COVER SHEET): 21

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<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>					Docket No. <b>WAR1394.07A</b>	
Applicant(s):						
Application No. <b>09/963,360</b>	Filing Date <b>09/24/2001</b>	Examiner <b>Yeung, G.C.P.</b>	Customer No. <b>8156</b>	Group Art Unit <b>1761</b>	Confirmation No. <b>8250</b>	
Invention: <b>DESICCATION APPARATUS AND METHOD</b>						
<b>COMMISSIONER FOR PATENTS:</b>						
Transmitted herewith is an amendment in the above-identified application.						
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	44 -	61 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	9 -	11 =	0 x	\$44.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>						
 _____ Signature			Dated: <b>October 18, 2004</b>			
<b>John P. O'Banion</b> <b>O'BANION &amp; RITCHEY LLP</b> <b>400 Capitol Mall, Suite 1550</b> <b>Sacramento, CA 95814</b> <b>(916) 498-1010</b>			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						

OCT 18 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Appl. No. : 09/963,360 Confirmation No.: 8250  
Applicant : WARE, GERALD J.  
Title : DESICCATION APPARATUS AND METHOD  
Filed : NOVEMBER 24, 2001  
TC/A.U. : 1761  
Examiner : YEUNG, GEORGE CHAN PUI  
Docket No. : WAR1394.07A  
Cust No. : 8156

**Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22213-1450**

**AMENDMENT AFTER FINAL**

Dear Sir:

In response to the Office Action mailed August 17, 2004, please amend the above-identified U.S. patent application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 14 of this paper.